# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

1002493

OMB Number

Expires: Feb

February 28, 2009

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4.00

### **TEMPORARY**

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ( check if this is an	amandment and nam	a has shanged and	indicata abanga )		09004999
Limited Partnership Interests of A		• .	muicate change.)		· <del>-</del>
Filing Under (Check box(es) that apply): Type of Filing:   New Filing	☐ Rule 504 ☑ Amendment	Rule 505	⊠ Rule 506	Section 4(6)	ULOE
	A. BAS	SIC IDENTIFICA	TION DATA		GEC W. essing
1. Enter the information requested about	it the issuer				
Name of Issuer ( check if this is an am A.P. Opportunities Fund, L.P.	endment and name ha	as changed, and ind	licate change.)		MAH 0 3 2009
Address of Executive Offices 360 Madison Avenue, 20th Floor, N		and Street, City, St. 7		elephone Number (Includin 212) 201-0500	g Area C&Ye)Shington, DC 111
Address of Principal Business Operations (if different from Executive Offices)	(Number	and Street, City, St	ate, Zip Code) T	elephone Number (Includin	g Area Code)
Brief Description of Business Private In	vestment Limited Pa	artnership	•	PDACE(	COFFR .
Type of Business Organization				I VACE	DOED -
	partnership, already for partnership, to be forr		her (please specif	MAR <b>12</b>	2009
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organiza	tion: (Enter two-le	Month Year [08] [95] etter U.S. Postal Se ida; FN for other fo	rvice abbreviation		REUTERS
GENERAL INSTRUCTIONS					

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T. Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (9-08)

1 of 8

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - · Each general and managing partner of partnership issuers.

Check Box(es) that Apply: *General Partner	Promoter	☐ Beneficial Owner	Executive Officer	Director	★General and/or  Managing Partner		
Full Name (Last name first,	if individual)		<u> </u>	<del></del> -			
A.P. Management LLC							
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)				
360 Madison Avenue, 20th	Floor, New Yo	rk, NY 10017					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	★ *General and/or  ★ *Gene		
*Managing Member of the	General Partr	ier			Managing Partner		
Full Name (Last name first,	if individual)						
Shuman, Alfred J.							
Business or Residence Addr	•		Code)				
360 Madison Avenue, 20th	Floor, New Yo	rk, NY 10017					
Check Box(es) that Apply: *President of the General	Promoter	☐ Beneficial Owner	➤ *Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Pignatelli, Joseph S., Jr.	•						
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)				
360 Madison Avenue, 20th	Floor, New Yo	rk, NY 10017					
Check Box(es) that Apply: * Chief Operating Officer			*Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Parker, David R.							
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)				
360 Madison Avenue, 20th	Floor, New Yo	rk, NY 10017					
Check Box(es) that Apply: *Chief Financial Officer of		Beneficial Owner	★Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, Small, Andrew J.	if individual)		<u> </u>				
Business or Residence Addr 360 Madison Avenue, 20 <sup>th</sup>			Code)	·			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)							

	<u></u>					B. INFOR						-			
1.	Has the issu	er sold, or	does the is	ssuer inten	d to sell, to	o non-accr	edited invo	estors in th	is offering	?	***************************************	•••••	***************************************	Yes	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.															
2. What is the minimum investment that will be accepted from any individual?							\$ <u>2,500,0</u>	000*							
*(tl	ne General P		• -					-							
3. Does the offering permit joint ownership of a single unit?								Yes ⊠	No.						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.															
Ful	Name (Last	name first,	if individ	ual)											
Bus	iness or Resid	lence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)								
Nar	ne of Associa	ted Broker	or Dealer												
Stat	es in Which I	Person List	ed Has So	licited or I	ntends to	Solicit Pun	chasers						<u></u>		
	(Check	"All State	s" or chec	k individu	al States).	•••••							***************************************	🔲 AI	l States
	[AL] [IL] {MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	Name (Last				[124]	[01]	[,1]	[ · · · · · ]	[,,,1,]	["'']	[ ,,,,]	["1]	[KK]		<del> </del>
Rus	iness or Resid	lence Addi	ress (Num	her and Str	eet City	State 7in (	Code)					<u> </u>			
Dus	mess of Resid	icite Addi	ess (Ivuin	oer and Su	cci, City,	State, Zip									
Nan	ne of Associa	ted Broker	or Dealer												
Stat	es in Which F	erson List	ed Has So	licited or I	ntends to	Solicit Purc	chasers				-	· · · · · · · · · · · · · · · · · · ·	<del></del>		
	(Check "All	States" or	check ind	ividual Sta	tes)			•••••••			***************************************		••••••	🗖 Al	l States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	Name (Last i	name first,	if individı	ıal)											
Bus	iness or Resid	lence Addr	ess (Num	ber and Str	eet, City,	State, Zip (	Code)								
Nan	ne of Associa	ted Broker	or Dealer												
Stat	es in Which P	erson List	ed Has So	licited or I	ntends to S	Solicit Purc	hasers							_	
(Check "All States" or check individual States)								🔲 Al'	States						
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
			(Use t	olank sheet	, or copy a	and use add	litional co	pies of this	sheet, as	necessary.	)		<del> </del>		
															<del></del>
		C.	OFFER	ING PRI	CE, NU	MBER O	F INVES	STORS, I	EXPENS	ES AND	USE OF	PROCE	EEDS		

Temporary Form D- A P Opportunities Fund L P .DOC

,	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROC	EEI	os
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$
	Equity	\$		\$
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			\$566,414,403
	Other (Specify)	\$		\$
		\$1,000,000,000		\$566,414,403
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	255		\$566,414,403
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	3004,		\$
	Regulation A			\$
	Rule 504		_	\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.			<u> </u>
	Transfer Agent's Fees	•••••		\$
	Printing and Engraving Costs		$\boxtimes$	\$ <u>10,000</u>
	Legal Fees	***************************************	$\boxtimes$	\$30,000
	Accounting Fees		$\boxtimes$	\$ <u>10,000</u>
	Engineering Fees			\$
	Sales Commissions (Specify finder's fees separately)			\$
	Other Expenses (identify)			
	Total		Ø	\$50,000
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$999,950,000

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proceed proposed to be used for each of the purposes shown. In purpose is not known, furnish an estimate and check the estimate. The total of the payments listed must equipproceeds to the issuer set forth in response to Part C – Quipproceeds.	f the amount for any box to the left of the al the adjusted gross			
	•		Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees		<b>\$</b>	□ \$	
	Purchase of real estate	•••••	<b>\$</b>		
	Purchase, rental or leasing and installation of machinery	and equipment	<b>\$</b>	□ \$	
	Construction or leasing of plant buildings and facilities	<b>\$</b>	<b>\$</b>		
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange for securities of another issuer pursuant to a merger)	or the assets	<b>\$</b>	□ \$	
	Repayment of indebtedness		<b>\$</b>	<b>\$</b>	
	Working capital		<b>S</b>	<b>\$</b>	
	Other (specify): Investment Capital	□ \$	<b>■</b> \$ <u>999,950,000</u>		
	Column Totals  Total Payments Listed (column totals added)		□ \$ ⊠ \$ <u>999,</u>		
	D. FEDER	AL SIGNATURE			
follow	suer has duly caused this notice to be signed by the understring signature constitutes an undertaking by the issuer to at of its staff, the information furnished by the issuer to any	furnish to the U.S. Sec	curities and Exchange Con	nmission, upon written	
	(Print or Type)  Opportunities Fund, L.P.	Signature	Date 2/2	7/09	
	of Signer (Print or Type) h S. Pignatelli	Type) President of A P I	Management LLC,		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)